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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	SSL-001
	First Named Inventor	Billings
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

A METHOD AND SYSTEM FOR PROVIDING DOWNSIDE PROTECTION OF STOCK MARKET INVESTMENTS

(Title of the invention)

the specification of which

☒ is attached hereto

(OR

☐ was filed on (MM/DD/YYYY):

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY):

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

[Page 1 of 2]

Build-it Your statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to <input type="checkbox"/> Customer Number or Bar Code Label <input type="text"/>		OR <input checked="" type="checkbox"/> Correspondence address below	
Name James A. Barry, Jr.			
Address 13967 Marquesas Way #19			
Address			
City Marina del Rey		State CA	ZIP 90292
Country USA	Telephone 310-306-8654		Fax 310-306-2582
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name James Martin (first and middle (if any))		Family Name Billings or Surname	
Inventor's Signature <i>James M. Billings</i>		Date 01-29-01	
Residence: City Sealy	State TX	Country USA	Citizenship USA
Mailing Address 810 North Meyer			
Mailing Address			
City Sealy	State TX	ZIP 77474	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name William Robert (first and middle (if any))		Family Name Bailey, Jr. or Surname	
Inventor's Signature <i>William R. Bailey Jr.</i>		Date 01-29-2001	
Residence: City Irving	State TX	Country USA	Citizenship USA
Mailing Address 4104 Esters Rd, Apt 2101			
Mailing Address			
City Irving	State TX	ZIP 75038	Country USA
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

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PTO/SB/81 (10-00,

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AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Billings
Group Art Unit	
Examiner Name	
Attorney Docket Number	SSL-001

I hereby appoint:

☐ Practitioners at Customer Number ☒ Practitioner(s) named below:Place Customer
Number Bar Code
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Name	Registration Number
James A. Barry, Jr.	44,524

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ Firm or
Individual Name **James A. Barry, Jr.**Address **13967 Marquesas Way #19**

Address

City **Marina del Rey**State **CA**Zip **90292**Country **USA**Telephone **310-306-8654**Fax **310-306-2582**

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**Name **James Martin Billings**Signature Date **01-30-01**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Billings
Group Art Unit	
Examiner Name	
Attorney Docket Number	SSL-001

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:Place Customer
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Name	Registration Number
James A. Barry, Jr.	44,524

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I am the:

☒ Applicant/Inventor☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name William Robert Bailey, Jr.

Signature *William Robert Bailey*

Date 01-29-2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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